Analysis of Health Welfare Policies in Malaysia-- Kg. Jeram Kedah Questionnaire

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ABSTRACT: This study analyzes the implementation and effectiveness of health and welfare policies in Malaysia. We used quantitative research methods to reach out to indigenous communities and ask them for their views and suggestions on welfare policies in Malaysia. Data was collected in the form of questionnaires. The results of the questionnaire show that the indigenous people of Malaysia value health, but this does not mean that they understand the importance of health. There is therefore a need to increase public health and hygiene education programmes. Although the Government has made great efforts to improve the health of indigenous peoples, considerable gaps remain in the practical implementation and cultural coherence of these policies. Use community health talks and online resources to raise awareness of the functions of nutrition. Governments should consider increasing investment in education, transport and economic support to ensure basic welfare for all. Strengthen welfare services in rural primary schools, including food, transport, education and health services, to raise awareness and understanding of health and hygiene among the indigenous peoples of Malaysia and help them improve their lives. The study highlights the need for more inclusive and culturally tailored health programmes and policies to meet the unique needs of indigenous peoples.

KEYWORDS: Indigenous Malaysian, welfare, health, medical, general knowledge, hygiene

1. INTRODUCTION

Malaysia's indigenous communities (collectively known as Orang Asal) face significant health and nutrition challenges that have long been marginalized in policy discussions. These communities account for approximately 13.8% of the country's population and include indigenous groups in Peninsular Malaysia, Sarawak and Sabah, which form the core population. This article mainly studies Malaysia's welfare policies and analyzes how they are implemented and whether they improve the lives of Malaysia's indigenous people. We will analyze whether the implementation of relevant policies is effective through aspects such as life span, age, and living environment.

   It is known from the literature that indigenous communities in Malaysia bear a disproportionately higher burden of poverty, malnutrition, and lack of basic infrastructure and health care compared to the general population. While the average life expectancy in Malaysia is over 70 years, the average life expectancy for Orang Asli as a whole is only around 53 years. We will

collect data to explore why Aboriginal people have short life spans and whether there are related policies. Additionally, serious health problems plague these communities, including severe malnutrition and micronutrient deficiencies, especially among children. Limited access to clean water, sanitation and hygiene facilities exacerbates their plight. They also face a greater burden of communicable and non-communicable diseases. Limited access to clean water, sanitation and hygiene facilities exacerbates their plight. Lack of health care services, especially in remote areas, exacerbates their vulnerability. At the same time, birth registration poses significant challenges to people living in remote areas, further hampering their access to health care services and rights to health benefits.

Given these disparities, policymakers must prioritize the health and welfare of Malaysia's indigenous communities. Current welfare policies related to health care infrastructure and medical services have shown promise, especially in primary health care and specialized care in remote areas. But in addition to promoting and protecting indigenous peoples' rights to health, they should be promoted not only through health care services, but also through cross-sectoral initiatives that address socioeconomic and environmental determinants.

2. (PROBLEM STATEMENT, OBJECTIVES, HYPOTHESIS)

Problem statement：

The implementation of medical welfare is a complex social project which involves a number of aspects such as policy formulation, fund management, service provision and regulatory enforcement. Many problems will be encountered in the course of implementation Medical welfare requires a large amount of financial support, and how to mobilise sufficient funds and how to distribute these funds in a fair and effective manner is an important issue. Medical resources may be unevenly distributed between urban and rural areas, different regions, and among themselves, affecting the universality and fairness of medical benefits.The strength and inappropriateness of policy formulation and implementation directly affects the effectiveness of medical benefits, and poor policy implementation may lead to wastage of resources or benefits not reaching those who really need them.The degree of public understanding and acceptance of medical welfare policies will also affect the effectiveness of policy implementation. The implementation of medical benefits also depends on advanced technology and effective management, and poor technology or management can be an obstacle to implementation. These are the problems encountered in the implementation of welfare policies. The main objectives of this study are:

Assessing the effectiveness of Malaysian welfare policies in improving the health and nutritional status of indigenous communities.

Explore the impact of current policies on life expectancy, age structure and living environment of Aboriginal communities.

3. LITERATURE REVIEW

This study examines the impact of Malaysia's health welfare policy on its citizens, with a particular focus on indigenous communities living in rural or remote areas. These communities pose challenges to the implementation of health welfare policies

due to their geographical location, which creates difficulties in accessing services and facilities. Orang Asli parents often have to pay more to send their children to nearby health facilities. This study aims to analyze the impact of Malaysia's health welfare policy on the indigenous population and explore potential strategies to address health care and service gaps.(Wong et al., 2019) A study shows that access to health services is a burden for the poor, including the indigenous people. The indigenous people often encounter obstacles such as remote areas, uneven doctor-patient ratios and poor medical environment when seeking medical treatment. Although the Malaysian government has established mobile clinics to facilitate the indigenous people. But this does not solve their fundamental problems. There are more considerations for setting up clinics for them, such as sustainability, budget allocation and transportation convenience. In emergency situations, it is crucial to establish mobile clinics to serve the indigenous people. Therefore, the establishment and improvement of health service policies are particularly important. The establishment of 1Malaysia clinics enables residents who cannot afford private clinics or live far away to obtain basic medical services, thereby improving medical accessibility for the urban population and reducing the burden on existing primary medical clinics. However, the cost of setting up and operating 1Malaysia clinics is relatively low compared to public hospitals and private hospitals, making it a more affordable healthcare delivery model. The cost of setting up a standard health clinic is RM25 million, while the cost of a 1Malaysia clinic is only RM500,000.(Kenny et al., 2017)(Yunus et al., 2013) However, the 1Malaysia clinic, which was staffed by medical assistants rather than doctors, was questioned and criticized for its poor medical standards. In addition, 1Malaysia clinics offer a limited range of services and can only deal with some minor illnesses, which may not meet the expectations of patients. (Ahmad Badruridzwanullah Bin Zun, 2017) Overall, although 1Malaysia Clinic provides a more convenient and economical option for some groups who cannot access other medical resources, there is still room for improvement in terms of medical quality and scope of services. (Zun et al., 2020) In addition, the National Health Insurance (NHI) scheme has contributed to the welfare of Malaysia. The NHI scheme aims to provide universal health insurance to give Malaysians access to both public and private healthcare services under a shared financing system. This helps address the current problem of high out-of-pocket medical costs. Potential benefits of NHI include increased funding for underfunded public healthcare systems, better risk sharing, and strategic purchase of healthcare services to respond to future pandemics.

4. METHODOLOGY & DATA ANALYSIS

This study uses a qualitative research design to investigate the impact of health and welfare policies on the indigenous population in Malaysia. The qualitative approach was chosen to gain insight into the perceptions and experiences of respondents regarding health and welfare policy. The study was conducted on April 27, 2024 in Keram Kedah village, Negri Sembilan, Malaysia. This location was chosen because the community has a large indigenous population and health and welfare policies are important to the community. A total of 17 Aboriginal people, ranging in age from 13 to 53, participated in the study. The sample consisted of 11 women and 6 men. Participants were selected through purposeful sampling to ensure diverse representation of the community. Inclusion criteria included: indigenous identity, willingness to participate in the study, and ability to provide informed consent.

Data were collected through semi-structured interviews. The interview guide included questions about participants' health

perceptions, perceptions of health and welfare policies, and the impact of these policies on their lives. Specific areas explored in the interviews included: perceptions and understanding of health and welfare policies, and experiences of accessing health services.

Of the 17 participants: - 12 had stable jobs and 5 were unemployed. - 9 had received basic education, with the highest level of education being a diploma. - Employment status and education level were recorded to understand the socioeconomic background of the respondents, which may affect their perceptions and experiences.

Data analysis

	yes（%）	no（%）
Is health important?	100.0%	0.0%
Do you visit the clinic at least twice a year?	88.2%	11.8%
Do you visit the dentist at least twice a year?	88.2%	11.8%
Do you brush your teeth twice a day?	94.1%	5.9%
Do you take a shower every day?	94.1%	5.9%
Is personal hygiene important?	100.0%	0.0%
Know the importance of health	70.6%	29.4%
Know the food pyramid	70.6%	29.4%
Know the nutritional functions	76.5%	23.5%
Know the best sources of vitamins	70.6%	29.4%
Importance of washing hands before meals	88.2%	11.8%
Do you pay attention to mental and spiritual health?	94.1%	5.9%
Do you think welfare is about helping everyone live a better life?	100.0%	0.0%
Do you think students' lives would be better if the government provided more welfare services?	100.0%	0.0%
Do you think everyone should have basic welfare rights?	100.0%	0.0%
Does the welfare system help make our society fairer?	100.0%	0.0%
Do you think welfare is a kind of support that the government should give people?	100.0%	0.0%

The feedback from respondents indicates a high level of recognition regarding the importance of health and personal hygiene, with all respondents affirming their significance (100%). A substantial majority of respondents visit clinics and dentists at least twice a year (88.2%) and maintain daily habits of brushing their teeth and bathing (94.1%).In terms of personal hygiene and health knowledge, while all respondents acknowledge the importance of personal hygiene (100%), there are still gaps in awareness: 29.4% of respondents are unaware of the importance of health, 29.4% do not know the food pyramid, 23.5% are unaware of nutritional functions, and 29.4% do not know the best sources of vitamins. Most respondents recognize the importance of washing hands before meals (88.2%). Mental health is also highly valued, with most respondents paying attention to their mental

well-being (94.1%). For them, welfare is crucial to both themselves and their families. Respondents unanimously agreed that government-provided welfare should encompass education, transportation, and economic support, with 23.5% emphasizing the critical importance of education, followed by transportation. Regarding basic welfare rights, all respondents concur that everyone should have access to basic welfare rights (17 respondents). Similarly, they agreed that the welfare system contributes to making society more equitable (17 respondents) and that welfare should be a form of government support provided to the populace (17 respondents). The respondents considered welfare to be very important for themselves and their families (3 respondents). In terms of welfare services that should be provided by the government in village primary schools, respondents suggested offering food, transportation, education, health services, infrastructure development, family counseling, and tutoring services. All respondents believed that welfare helps individuals lead better lives (17 respondents), and that students' lives would improve if the government provided more welfare services (17 respondents). The general consensus among respondents is that welfare plays a crucial role in both social and personal life, with an expectation that the government will enhance the provision of various welfare services in schools to improve the living and learning environments of students.

This analysis synthesizes the respondents' perspectives and expectations concerning health, personal hygiene, mental health, and welfare services, underscoring their strong emphasis on the government's role in investing in education and social services.

5. RESULTS AND DISCUSSION

As we can see from the results compiled from the questionnaire, the majority of the Malaysian indigenous population is health and hygiene conscious, but there is still a bonus thirty per cent of the population who are unaware or uninformed of the importance of health and hygiene, which calls for an increase in the number of public health and personal hygiene education programmes, especially for those who are not sufficiently aware of the importance of health. Popularise knowledge of the food pyramid and nutrition through schools, community centres and media outlets. Conduct targeted health education campaigns to help people understand the importance of good health and how to get essential vitamins and other nutrients. Utilise community health talks and online resources to raise awareness of the functions of nutrition. Governments should consider increasing investment in education, transport and economic support to ensure that basic benefits are available to all. Strengthening welfare services for primary schools in villages, including food, transport, education, and health services to increase the importance and understanding of health and hygiene among the indigenous Malaysian population to help them improve their lives.

6. POLICY IMPLICATION AND CONCLUSIONS

Based on this questionnaire, we can see that the Malaysian indigenous people are not ignorant of the general knowledge of health and medical care. Based on this, we should disseminate the knowledge and formulate welfare policies to help the indigenous people to live a better life.The Malaysian government has also implemented welfare policies on access to healthcare such as the Klinik 1 Malaysia clinic (K1M). The government's intentions may be good, but the poor receive poor healthcare. Some GPs believe that instead of setting up welfare hospitals like K1M, the government should permanently extend the opening hours of

government clinics so that doctors can work in shifts. Most government clinics operate from 8am to 5pm. Expanding government clinics to maximise resources and save money would be more sustainable in the long run. Malaysia has only 132 public hospitals serving a population of 30 million. More hospitals are needed as patients are suffering from a shortage of hospital beds.Policymakers should take into account the views of interviewees and formulate and implement policies that enhance social equity and provide the necessary support. Ensure policy transparency and public participation to enhance policy effectiveness and public trust. Health, sanitation and welfare services should be regularly monitored and evaluated to ensure that they meet the needs of the people and are improved in a timely manner. Only by developing and improving welfare policies based on the needs of the indigenous population in Malaysia can the people being assisted be better helped.

7. ACKNOWLEDGMENT

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